



Uinta-Wasatch-Cache National Forest

Temporary Outfitter & Guide Permits

NON-HUNTING Outfitter/Guide Applications

Applications are accepted during designated **Open-Seasons only**.

- **Winter Season** Outfitting and Guiding Permits
 - Applications accepted at all Ranger District Offices **July 1st-31st**
- **Summer Season** Outfitting and Guiding Permits
 - Applications accepted at all Ranger District Offices **January 1st-31st**

LIMITATIONS:

- **Salt Lake Ranger District** utilizes a "Lottery System", in which each applicant is assigned a number and drawn at random. Permits will be issued in order by which they are drawn until all 400 user days are awarded.
- **Ogden & Logan Ranger Districts** accepts limited requests ONLY:
 - Accommodation of youth specifically for outdoor educational purposes.
 - For instruction based on safety awareness, or outdoor skill development.
 - Must occur during low public use periods, or does not conflict with public recreation.

HUNTING Outfitter/Guide Applications

Applications are accepted year-round at all Ranger District Offices, with the exception of Salt Lake Ranger District which is not accepting O/G hunting applications.

We are NOT currently issuing any Forest-wide Outfitter & Guide Permits

How to Apply

Review the [Application Checklist](#), [Insurance Requirements](#), and [Fee Schedule](#).

Contact the applicable [Ranger District Office](#) for proposal review.

Complete and submit the [Permit Application](#) with all required information during designated **Open-Seasons only**.

Application Checklist:

- Contact the applicable [Ranger District Office](#) for proposal prescreening.
- Complete and submit a detailed [Permit Application](#) **during the designated open season**, to include the following:
 - Detailed map of the proposed race/event area:
 - Certificate of Insurance
 - Operating Plan
 - Client Acknowledgement of Risk Form
([Sample Acknowledgement of Risk Form](#))
 - Copy of a current business license

Insurance Requirements

- **One (1) Million General Liability is required, submitted on ACCORD 25 2010/05 form. If aircraft is involved, the Minimum Coverage Amount is \$5 million.**
- The Certificate of Insurance and the Insurance Policy Endorsement must show the **“United States”** (not “US Forest Service”) as additionally insured. The certificate AND the endorsement page must be submitted to the **District Office** either with the permit request or immediately upon approval of the request, before activities commence.
- The following clause must also appear on the face of the certificate and on the endorsement page of the certificate:

“It is understood and agreed that the United States of America, Uinta-Wasatch-Cache National Forest, U.S. Department of Agriculture, is additionally insured solely as respects liability arising from operations of the name insured.”

- The Certificate Holder for filming occurring on the Uinta-Wasatch-Cache National Forest is:

“United States, USDA Uinta-Wasatch-Cache National Forest, 857 West South Jordan Parkway, South Jordan, Utah 84095-8594”

2020 Fee Schedule & Payment

Temporary outfitter & guide permits are charged a flat land use fee for temporary use permits based on the amount of use allocated in service days as follows:

Number of Service Days	Flat Fee	Maximum Gross Revenue for Each Bracket of Service Days
1 to 50	\$150	\$10,000
51 to 100	\$300	\$20,000
101 to 150	\$450	\$30,000
151 to 200	\$600	\$40,000

Column 3 in the table above shows the maximum amount of gross revenue for each bracket of service days that qualifies for a flat fee. If gross revenue exceeds the amount in the applicable bracket, land use fees will be calculated at 3% of the adjusted gross revenue.

District Office Contact Information

- 1. Salt Lake Ranger District Office**
Phone: 801-733-2660
Contact: Ben Kraja
- 2. Pleasant Grove Ranger District Office**
Phone: 801-785-2563
Contact: Billy Preston
- 3. Spanish Fork Ranger District Office**
Phone: 801-798-3571
Contact: Billy Preston
- 4. Heber-Kamas Ranger District Office**
Phone: 435-783-4338
Contact: Polly Bergseng
- 5. Ogden Ranger District Office**
Phone: 801-625-5112
Contact: Amy Forsgren
- 6. Logan Ranger District Office**
Phone: 435-755-3620
Contact: Amy Forsgren
- 7. Evanston-Mountain View District Office**
Phone: 307-789-3194
Contact: Juan Barrientez
- 8. Forest Headquarters (Supervisor's Office)**
Phone: 801-999-2103
Contact: Larry Framme



Use Code:	FS-2700-3f (10/09)
Authorization ID: FOREST SERVICE USE	OMB No. 0596-0082
Contact Name:	
Expiration Date:	

SPECIAL USE APPLICATION & TEMPORARY PERMIT FOR OUTFITTING AND GUIDING
Authority: Federal Lands Recreation Enhancement Act, 16 U.S.C. 6802(h)
(Ref.: FSH 2709.11, section 41.53)

PART I - APPLICATION

1. APPLICANT INFORMATION

Applicant Name: _____

Business Name: _____

Applicant's Complete Address: _____

Telephone Number: _____ Fax Number: _____

E-mail Address: _____

Website: _____

As an applicant, are you:

<input type="checkbox"/> Individual	If yes, are you a citizen of the United States?
<input type="checkbox"/> Corporation	If yes, provide a copy of your state certificate of good standing.
<input type="checkbox"/> Limited Liability Company	If yes, provide a copy of your state certificate of good standing.
<input type="checkbox"/> Partnership or Association	If yes, provide a copy of your partnership or association agreement.
<input type="checkbox"/> State Government or Agency	(Includes state universities)
<input type="checkbox"/> Local Government or Agency	(Includes high schools)
<input type="checkbox"/> Nonprofit	(Please attach a copy of your IRS Form 990)

Under the Regulatory Flexibility Act, a small entity is a firm that is "independently owned and operated" and "not dominant in its field of operation." The United States Small Business Administration has developed size standards to identify what is considered a small business. Under these standards, a business with annual receipts of less than \$6.5 million constitutes a small business for recreation industries. Additionally, a small

organization is any nonprofit enterprise that is independently owned and operated and not dominant in its field. A small government jurisdiction is a government of a city, county, town, township, village, school district, or special district with a population of less than 50,000.

Under these criteria, are you a small entity? _____

2. DESCRIPTION OF PROPOSED ACTIVITY

Please include:

- . The number of service days requested (or quota equivalent).
- . The anticipated number of trips and party size.
- . Trip Itinerary with:
 - . Starting and ending dates of the proposed operations.
 - . Location of routes and starting and ending points for the proposed operations (include a map showing these locations).
 - . Services that will be offered to clients (identify any services that will be provided by a party other than the holder).
- . A description of your client base or audience.
- . A list of government facilities you propose to use, e.g., a boat launch, parking lot, or trailhead.
- . A list of temporary improvements or signs that you propose to use.
- . A statement of whether the proposed operations involve motorized equipment.
- . A statement of whether the proposed operations involve transportation livestock, and if so, whether grazing is requested.
- . A statement of whether an assigned site is requested.
- . A description of cleanup and restoration during and after the proposed operations.

3. ADVERTISING. Provide a current brochure and current advertising materials or website address.

4. CLIENT CHARGES. Provide a description of client charges and fees and what they cover. Attach a current rate sheet.

5. GUIDE IDENTIFICATION

- . Attach a list of all guides who would be working under the permit.
- . Describe your requirements for employment and staff training programs.
- . Attach copies of current CPR and First Aid certifications, Wilderness First Responder cards, and other applicable certifications for guides. Please do not send copies of social security cards or passports. Send driver's licenses only if driving is part of the outfitting and guiding service.
- . If the state in which your activity would occur requires licensing for outfitters and guides, include a copy of relevant licenses.

6. OPERATING PLAN. Attach an operating plan that addresses client and visitor safety, evacuation and emergency procedures, and resource protection with respect to your proposed operations and location.

7. LIABILITY INSURANCE. The holder will be required to obtain liability insurance in an amount satisfactory to the authorized officer (see FSM 2713.1). The insurance policy must name the United States as an additional insured. A copy of the certificate of insurance must be provided to the authorized officer prior to issuance of a permit.

8. CLIENT'S ACKNOWLEDGMENT OF RISK FORM. If you plan to use an acknowledgment of risk form, attach a copy.

9. EXPERIENCE. List all permits for outfitting and guiding on National Forest System lands that you have held in the past 3 years. If you received a performance evaluation from the Forest Service, attach a copy. If you are relying on outfitting and guiding experience with other federal or state agencies, list any permits that you have held with those agencies in the past 3 years and provide a copy of any performance evaluations received. List all citations or violations received in association with outfitting and guiding activities.

10. SIGNATURE. I hereby certify that I am of legal age and am authorized to do business in the State or Commonwealth of _____. I have personally examined the information contained in this application and certify that this information is correct to the best of my knowledge. I hereby acknowledge that this is an application only, and that the use and occupancy of National Forest System lands is not authorized until a special use permit is signed and issued by an authorized officer.

Printed Name: _____ Signature: _____ Date: _____

According to the Paperwork Reduction Act of 1995, an agency may not conduct or sponsor, and a person is not required to respond to a collection of information unless it displays a valid OMB control number. The valid OMB control number for this information collection is 0596-0082. The time required to complete this information collection is estimated to average 4 hours per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information.

The U.S. Department of Agriculture (USDA) prohibits discrimination in all its programs and activities on the basis of race, color, national origin, age, disability, and where applicable, sex, marital status, familial status, parental status, religion, sexual orientation, genetic information, political beliefs, reprisal, or because all or part of an individual's income is derived from any public assistance. (Not all prohibited bases apply to all programs.) Persons with disabilities who require alternative means for communication of program information (Braille, large print, audiotape, etc.) should contact USDA's TARGET Center at 202-720-2600 (voice and TDD).

To file a complaint of discrimination, write USDA, Director, Office of Civil Rights, 1400 Independence Avenue, SW, Washington, DC 20250-9410 or call toll free (866) 632-9992 (voice). TDD users can contact USDA through local relay or the Federal relay at (800) 877-8339 (TDD) or (866) 377-8642 (relay voice). USDA is an equal opportunity provider and employer.

The Privacy Act of 1974 (5 U.S.C. 552a) and the Freedom of Information Act (5 U.S.C. 552) govern the confidentiality to be provided for information received by the Forest Service.

Sample Acknowledgment of Risk Form

The undersigned recognizes the element of risk in any adventure, sport, or activity associated with the outdoors. The undersigned is fully aware of the risks inherent in **[activity]** conducted on National Forest System (NFS) lands, including but not limited to **[risks]**. The undersigned understands that the possible consequences of participating in this activity include **[consequences]**.

The undersigned has the necessary skills and ability to participate in **[activity]** conducted by **[the holder]** on NFS lands and assumes full responsibility for bodily injury, death, and loss of personal property as a result of the undersigned's negligence in participating in **[activity]** conducted by **[the holder]** on NFS lands, except to the extent that the bodily injury, death, or loss of personal property may be due to the negligence of **[the holder]**.

The undersigned also agrees to abide by the rules or instructions given to the undersigned either verbally or in writing by **[the holder]**. The undersigned further understands that **[the holder]** reserves the right to refuse to allow any person to participate in this activity who is judged to be incapable of meeting the rigors and requirements of participation.

The undersigned has read, understood, and accepted the terms and conditions in this agreement. The undersigned's participation in **[activity]** conducted by **[the holder]** on NFS lands is purely voluntary, and the undersigned elects to participate in spite of the risks.

If the undersigned files a lawsuit against **[the holder]** in connection with **[activity]** conducted by **[the holder]** on NFS lands, the undersigned agrees to file solely in the State/Commonwealth of **[state]** and agrees that the substantive law of that state shall apply in that lawsuit without regard to the conflict of laws rules of that state. The undersigned agrees that if a portion of this agreement is found to be unenforceable, the remaining portions shall remain in effect.

Participant 21 Years of Age or Older

Signature

Date

Print Name

Participant Under 21 Years of Age (signature of parent/legal guardian required)

Signature

Date

Print Name

Signature of Parent/Legal Guardian

Date

Print Name of Parent/Legal Guardian

